

Fill in this information to identify your case:

Debtor 1	Robert Morris Levin		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	20-11046-BFK		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 792,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 15,023.95
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 807,023.95

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 915,019.39
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 404,754.97
Your total liabilities		\$ 1,319,774.36

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 9,867.58
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 10,165.06

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ _____

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

	Total claim
From Part 4 on <i>Schedule E/F</i>, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 0.00

Fill in this information to identify your case and this filing:

Debtor 1	Robert Morris Levin		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		
Case number	20-11046-BFK		

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Official Form 106A/B Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

9126 Briarwood Farms Ct.

Street address, if available, or other description

Fairfax VA 22031-1346

City State ZIP Code

Fairfax

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$792,000.00	\$792,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Tenants by the entirety

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$792,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1 Make: Lexus
 Model: ES300
 Year: 2006
 Approximate mileage: 84,000
 Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$4,000.00

\$4,000.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$4,000.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe.....

Miscellaneous household goods and furnishings, including Living room: couch, side chair, 2 end tables, lamp, console table; Dining room: table & 6 chairs, buffet/server cabinet, upright bar; Kitchen: table & 4 chairs, dishes, utensils, glassware, pots & pans, coffee maker, toaster, mixer, mini grill; Family room: 2 sofas, 2 end tables, corner table, coffee table, 4 lamps; Library/home office: table, 2 cabinets, file cabinet, chair; Master bedroom: bed, 3 dressers, 2 night stands, 2 lamps; Bedroom 1/Sitting room: sofa, 2 end tables, recliner wicker chest; Bedroom 2: 2 twin beds; Bedroom 3: queen bed, chest of drawers, bookcase, end table, chair; linens, iron, ironing board, clocks, and miscellaneous hand tools

\$1,250.00

Miscellaneous books, photographs, pictures, CDs, and DVDs

\$100.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☐ No
☒ Yes. Describe.....

Miscellaneous electronics, including 5 TVs, old stereo, computer, monitor, and printer

\$250.00

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe.....

2 Todd White Giclee paintings

\$750.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.....

Miscellaneous sporting goods and hobby equipment, including 4 bicycles, treadmill, and recumbent bike

\$200.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Miscellaneous men's clothing, including suits, shirts, pants, shoes, socks, undergarments, coats, sweaters, ties, belts, and accessories

\$200.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

Wedding band

\$50.00

6 watches

\$300.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$3,100.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Debtor 1 Robert Morris LevinCase number (if known) 20-11046-BFK**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☐ No☒ Yes.....Cash on hand \$125.50**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes.....

Institution name:

17.1. Savings

SunTrust acct. #0173\$321.0117.2. Checking and
SavingsCapital One Bank acct. #3781 (\$2,548.24) and
acct. #1361 (\$3,678.20)\$6,226.44**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☐ No☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Membership interest in Systems Support Products,
LLC dba Best Ergonomics100 %\$1.00**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- ☐ No
☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Unknown potential tax refunds and recovery rebates

Federal and State

Unknown

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☐ No
☒ Yes. Give specific information..

Accrued sales commission, earned but not yet paid

\$1,100.00

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
☐ Yes. Name the insurance company of each policy and list its value.
Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No
☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☒ No
☐ Yes. Describe each claim.....

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$7,773.95

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☐ No. Go to Part 6.
☒ Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No
☐ Yes. Describe.....

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☐ No
☒ Yes. Describe.....

2 file cabinets and old computer

\$150.00

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No
☐ Yes. Describe.....

41. Inventory

- ☒ No
☐ Yes. Describe.....

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations

- ☒ No.
☐ Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

- ☒ No
☐ Yes. Describe.....

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information.....

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....

\$150.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		<u>\$792,000.00</u>
56. Part 2: Total vehicles, line 5	<u>\$4,000.00</u>	
57. Part 3: Total personal and household items, line 15	<u>\$3,100.00</u>	
58. Part 4: Total financial assets, line 36	<u>\$7,773.95</u>	
59. Part 5: Total business-related property, line 45	<u>\$150.00</u>	
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>	
61. Part 7: Total other property not listed, line 54	+ <u>\$0.00</u>	
62. Total personal property. Add lines 56 through 61...	<u>\$15,023.95</u>	Copy personal property total <u>\$15,023.95</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62		<u>\$807,023.95</u>

Fill in this information to identify your case:

Debtor 1	Robert Morris Levin		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	20-11046-BFK		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
9126 Briarwood Farms Ct. Fairfax, VA 22031-1346 Fairfax County Line from <i>Schedule A/B</i> : 1.1	\$792,000.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(3)(B); VA Code §§ 34-4 & -6
2006 Lexus ES300 84,000 miles Line from <i>Schedule A/B</i> : 3.1	\$4,000.00	<input checked="" type="checkbox"/> \$4,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(8); VA Code §§ 34-4, -13 & -14
Miscellaneous household goods and furnishings, including Living room: couch, side chair, 2 end tables, lamp, console table; Dining room: table & 6 chairs, buffet/server cabinet, upright bar; Kitchen: table & 4 chairs, dishes, utensils, glassware, pots & pa Line from <i>Schedule A/B</i> : 6.1	\$1,250.00	<input checked="" type="checkbox"/> \$1,250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(4a)
Miscellaneous books, photographs, pictures, CDs, and DVDs Line from <i>Schedule A/B</i> : 6.2	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(2) & (4a)

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Miscellaneous electronics, including 5 TVs, old stereo, computer, monitor, and printer Line from Schedule A/B: 7.1	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(4a)
2 Todd White Giclee paintings Line from Schedule A/B: 8.1	\$750.00	<input checked="" type="checkbox"/> \$750.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(4a); VA Code §§ 34-4, -13 & -14
Miscellaneous sporting goods and hobby equipment, including 4 bicycles, treadmill, and recumbent bike Line from Schedule A/B: 9.1	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(4a)
Miscellaneous men's clothing, including suits, shirts, pants, shoes, socks, undergarments, coats, sweaters, ties, belts, and accessories Line from Schedule A/B: 11.1	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(4)
Wedding band Line from Schedule A/B: 12.1	\$50.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26 (1a)
6 watches Line from Schedule A/B: 12.2	\$300.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(4)
Cash on hand Line from Schedule A/B: 16.1	\$125.50	<input checked="" type="checkbox"/> \$125.50 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code §§ 34-4, -13 & -14
Savings: SunTrust acct. #0173 Line from Schedule A/B: 17.1	\$321.01	<input checked="" type="checkbox"/> \$321.01 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code §§ 34-4, -13 & -14
Checking and Savings: Capital One Bank acct. #3781 (\$2,548.24) and acct. #1361 (\$3,678.20) Line from Schedule A/B: 17.2	\$6,226.44	<input checked="" type="checkbox"/> \$6,226.44 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-29; 42 U.S.C. § 407; VA Code §§ 34-4, -13 & -14
Membership interest in Systems Support Products, LLC dba Best Ergonomics 100 % ownership Line from Schedule A/B: 19.1	\$1.00	<input checked="" type="checkbox"/> \$1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code §§ 34-4, -13 & -14
Federal and State: Unknown potential tax refunds and recovery rebates Line from Schedule A/B: 28.1	Unknown	<input checked="" type="checkbox"/> \$1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code §§ 34-4, -13 & -14

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Accrued sales commission, earned but not yet paid Line from Schedule A/B: 30.1	\$1,100.00	<input checked="" type="checkbox"/> \$1,100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-29; VA Code §§ 34-4, -13 & -14 (as to \$275)
2 file cabinets and old computer Line from Schedule A/B: 39.1	\$150.00	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	VA Code § 34-26(4a) & (7)

3. **Are you claiming a homestead exemption of more than \$170,350?**

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

Fill in this information to identify your case:

Debtor 1	Robert Morris Levin		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	20-11046-BFK		

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 M&T Bank Creditor's Name	\$251,973.16	\$792,000.00	\$123,019.39
Describe the property that secures the claim: 9126 Briarwood Farms Ct. Fairfax, VA 22031-1346 Fairfax County			
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit			
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim relates to a community debt			
<input checked="" type="checkbox"/> Other (including a right to offset) 2nd priority deed of trust (SBA loan)			
Date debt was incurred	7/14/11	Last 4 digits of account number	1634

Debtor 1 <u>Robert Morris Levin</u>		Case number (if known) <u>20-11046-BFK</u>	
<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>	

2.2 <u>U.S. Bank Home Mortgage</u> <small>Creditor's Name</small> <u>P.O. Box 790415</u> <u>Saint Louis, MO</u> <u>63179-0415</u> <small>Number, Street, City, State & Zip Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> 9126 Briarwood Farms Ct. Fairfax, VA 22031-1346 Fairfax County </div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>1st priority deed of trust</u>	<u>\$663,046.23</u> <u>\$792,000.00</u> <u>\$0.00</u>
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Who owes the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred October 2010
 Last 4 digits of account number 3453

Add the dollar value of your entries in Column A on this page. Write that number here:	\$915,019.39
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	\$915,019.39

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/> Name, Number, Street, City, State & Zip Code CoastProfessional, Inc. P.O. Box 246 Geneseo, NY 14454	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number ____
<input type="checkbox"/> Name, Number, Street, City, State & Zip Code J. Baker McClanahan, Jr. Randolph, Boyd, et al. 14 E. Main St. Richmond, VA 23219	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number ____
<input type="checkbox"/> Name, Number, Street, City, State & Zip Code U.S. Dept. of the Treasury Bureau of the Fiscal Service P.O. Box 830794 Birmingham, AL 35283-0794	On which line in Part 1 did you enter the creditor? <u>2.1</u> Last 4 digits of account number ____

Fill in this information to identify your case:

Debtor 1	Robert Morris Levin		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	20-11046-BFK		

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	Commonwealth of Virginia Priority Creditor's Name Dept. of Taxation Legal Unit, P.O. Box 2156 Richmond, VA 23218 Number Street City State Zip Code	Last 4 digits of account number	Unknown	\$0.00
		When was the debt incurred?	2015-2016	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify Claim against System Support Products, LLC, listed for information only		

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

2.2	Internal Revenue Service Priority Creditor's Name 400 N. 8th Street, Box 76 Stop Room 898 Richmond, VA 23219 Number Street City State Zip Code	Last 4 digits of account number _____ Unknown	Unknown	Unknown
	When was the debt incurred? <u>2015-2016</u>			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed				
Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____				
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Claim against System Support Products, LLC, listed for information only				

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1	Aftech Advanced Fabricating Co Nonpriority Creditor's Name 687 Byrne Industrial Dr. Rockford, MI 49341 Number Street City State Zip Code	Last 4 digits of account number _____	_____	Total claim \$1,842.64
	When was the debt incurred? _____			
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim solely against Systems Support Products, LLC, listed for information only</u>				
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.2	Air Movers, Inc. Nonpriority Creditor's Name 7721-B2 Fullerton Rd. Springfield, VA 22153 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim solely against Systems Support Products, LLC, listed for information only</u>	\$1,554.00
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4.3	AllianceOne Nonpriority Creditor's Name 4850 Street Rd., Suite 300 Trevoze, PA 19053 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim solely against Systems Support Products, LLC, listed for information only</u>	\$1,205.00
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4.4	Bolhouse, Baar & Hofstee, PC Nonpriority Creditor's Name 3996 Chicago Dr., SW Grandville, MI 49418-1384 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0418</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim against Systems Support Products, LLC, personally guaranteed</u>	\$6,681.96
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Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.5	Brooks Brothers Nonpriority Creditor's Name <u>P.O. Box 9001006</u> <u>Louisville, KY 40290-1006</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3159</u> \$5,133.38 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Retail credit card</u>
4.6	Byrne Electrical Specialists Nonpriority Creditor's Name <u>320 Byrne Industrial Dr.</u> <u>Rockford, MI 49341</u> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ \$1,228.68 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim solely against Systems Support Products, LLC, listed for information only</u>
4.7	Canada Revenue Agency Nonpriority Creditor's Name <u>P.O. Box 3800 STN A</u> <u>Sudbury, ON P3A0C3</u> <u>CANADA</u> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ \$30,162.63 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim against Systems Support Products, LLC, listed for information only</u>

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.8	Capital One Bank Nonpriority Creditor's Name Deposit Recovery Dept. P.O. Box 85057 Richmond, VA 23285-5057 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0967</u> \$409.47 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim solely against Systems Support Products, LLC, listed for information only</u>
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4.9	Capital One Bank (USA), N.A. Nonpriority Creditor's Name P.O. Box 71083 Charlotte, NC 28272-1083 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4951</u> \$684.06 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim against Systems Support Products, LLC, personally guaranteed</u>
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4.1 0	Chantilly Parc, LLC Nonpriority Creditor's Name c/o Pruitt Corporation 14900 Bogle Dr. Chantilly, VA 20151 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ \$35,055.95 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Claim solely against Systems Support Products, LLC, listed for information only</u>
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Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.1
1

Citibank, N.A.

Last 4 digits of account number 7422

Unknown

Nonpriority Creditor's Name

P.O. Box 790110

Saint Louis, MO 63179-0110

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Levin Associates, listed for information only

4.1
2

Dell Financial Services

Last 4 digits of account number _____

\$3,184.44

Nonpriority Creditor's Name

P.O. Box 5275

Carol Stream, IL 60197-5275

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.1
3

Dental Associates Burke

Last 4 digits of account number 0659

\$239.40

Nonpriority Creditor's Name

6035 Burke Centre Pkwy.

Suite 200

Burke, VA 22015

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Dental bill

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.1
4

E. Clifton Ingram Jr. CPA

Last 4 digits of account number

\$8,425.00

Nonpriority Creditor's Name
3 Interstate Corporate Center
Suite 225
Norfolk, VA 23502

When was the debt incurred?

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Contingent

☐ Debtor 2 only

☐ Unliquidated

☐ Debtor 1 and Debtor 2 only

☒ Disputed

☒ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.1
5

Electri-Cable Assembly, Inc.

Last 4 digits of account number

\$5,649.90

Nonpriority Creditor's Name
10 Mountain View Dr.
Shelton, CT 06484

When was the debt incurred?

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Contingent

☐ Debtor 2 only

☐ Unliquidated

☐ Debtor 1 and Debtor 2 only

☒ Disputed

☒ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.1
6

Envision Automation, LLC

Last 4 digits of account number

\$3,694.50

Nonpriority Creditor's Name
7200 Easy St.
Temple Hills, MD 20748

When was the debt incurred?

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Contingent

☐ Debtor 2 only

☐ Unliquidated

☐ Debtor 1 and Debtor 2 only

☒ Disputed

☒ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.1
7

Estes Express Lines

Nonpriority Creditor's Name
P.O. Box 25612
Richmond, VA 23260-5612
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$1,563.75

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.1
8

Federal Express

Nonpriority Creditor's Name
P.O. Box 371461
Pittsburgh, PA 15250-7461
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$1,647.67

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.1
9

Flinn & Beagan

Nonpriority Creditor's Name
8300 Boone Blvd., Suite 225
Vienna, VA 22182-2630
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$1,205.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.2
0

Gibraltar GB Products

Nonpriority Creditor's Name
421 N. Centennial St.
Zeeland, MI 49464

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$1,500.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.2
1

Hathaway

Nonpriority Creditor's Name
347 S. Oak Ln.
Waynesboro, VA 22980

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$147.84

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.2
2

High-Q Lighting, Inc.

Nonpriority Creditor's Name
11439 E. Lakwood Blvd.
Holland, MI 49424

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$2,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.2
3

Inova

Nonpriority Creditor's Name
P.O. Box 37013
Baltimore, MD 21297-3013
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 4399

\$226.15

When was the debt incurred? 11/22/19-11/23/19

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Medical bill

4.2
4

IS Tech Support, Inc.

Nonpriority Creditor's Name
P.O. Box 1494
Whittier, CA 90609
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$1,400.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.2
5

Keystone Laminates, Inc.

Nonpriority Creditor's Name
375 Ivyland Rd., Unit 21
Warminster, PA 18974
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$13,310.80

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.2
6

Knap & Vogt Manufacturing Co.

Last 4 digits of account number

\$173,341.28

Nonpriority Creditor's Name
2700 Oak Industiral Dr., NE
Grand Rapids, MI 49505

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☒ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim against Systems Support Products, LLC, personally guaranteed

4.2
7

Light Corp.

Last 4 digits of account number

\$34,287.25

Nonpriority Creditor's Name
14800 172nd Ave.
Grand Haven, MI 49417

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.2
8

Link + Corporation

Last 4 digits of account number

\$425.38

Nonpriority Creditor's Name
10-4380 Wellington Rd. South
London, ON B6E2Z6
CANADA

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.2
9

M&T Bank

Nonpriority Creditor's Name
P.O. Box 1302
Buffalo, NY 14240-1302

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

\$663.18

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.3
0

Micro Plastics, Inc.

Nonpriority Creditor's Name
Hwy. 178 N.
P.O. Box 149
Flippin, AR 72634-0149

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

\$796.12

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.3
1

Office Depot Business Credit

Nonpriority Creditor's Name
P.O. Box 790439
St. Louis, MO 63179

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

4201

\$116.87

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☒ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim against Levin Associates, personally guaranteed

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.3
2

Offix

Nonpriority Creditor's Name
13525 Wellington Center Cir.
Suite 107
Gainesville, VA 20155

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

\$4,877.56

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.3
3

Pitt Ohio Express, LLC

Nonpriority Creditor's Name
15 27th St.
Pittsburgh, PA 15222

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

\$2,776.89

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.3
4

Public Storage

Nonpriority Creditor's Name
2818 Merrilee Dr.
Fairfax, VA 22031-4410

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

0091

\$1,290.70

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Unpaid storage fees for business property in Unit 3404

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.3
5

Public Storage

Nonpriority Creditor's Name
2818 Merrilee Dr.
Fairfax, VA 22031-4410

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number 0083

\$1,625.10

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Unpaid storage fees for business property in Unit 3503

4.3
6

Quest Diagnostics

Nonpriority Creditor's Name
P.O. Box 740880
Cincinnati, OH 45274-0880

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number 2933

\$154.99

When was the debt incurred? 10/9/15

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Medical bill

4.3
7

R&L Carriers, Inc.

Nonpriority Creditor's Name
P.O. Box 10020
Port William, OH 45164-2000

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$455.27

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.3
8

Rees, Broome, PC

Nonpriority Creditor's Name
1900 Gallows Rd., Suite 700
Vienna, VA 22182

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ **Check if this claim is for a community debt**
- Is the claim subject to offset?**
- ☒ No
- ☐ Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.3
9

Softworqs, Div. of UC Ind.

Nonpriority Creditor's Name
3900 E. Valley Blvd., Suite F
Walnut, CA 91789

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ **Check if this claim is for a community debt**
- Is the claim subject to offset?**
- ☒ No
- ☐ Yes

Last 4 digits of account number _____

\$482.40

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.4
0

South Central Polymers, Inc.

Nonpriority Creditor's Name
535 Highway 145 North
Booneville, MS 38829

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ **Check if this claim is for a community debt**
- Is the claim subject to offset?**
- ☒ No
- ☐ Yes

Last 4 digits of account number _____

\$1,041.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.4
1

Techne TSC

Nonpriority Creditor's Name
332 Avro
Pointe-Claire, QC H9R5W5
CANADA

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

\$51,940.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.4
2

TruGreen

Nonpriority Creditor's Name
P.O. Box 9001128
Louisville, KY 40290-1128

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number 5912

\$152.85

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Lawn maintenance

4.4
3

United Parcel Service

Nonpriority Creditor's Name
P.O. Box 7247-0244
Philadelphia, PA 19170-0001

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

\$1,244.21

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

4.4
4

US Tech, LLC

Nonpriority Creditor's Name
P.O. Box 120
Port Tobacco, MD 20677
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ **Check if this claim is for a community debt**
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

\$455.90

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only

4.4
5

Villa del Palmar - PV

Nonpriority Creditor's Name
Constructora de Los Ancos del
P.O. Box 51469
Los Angeles, CA 90051-5769
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

5067

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Timeshare maintenance fees

4.4
6

Virginia Heart/IHCS

Nonpriority Creditor's Name
2901 Telestar Ct., Suite 300
Falls Church, VA 22042-1263
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number

3379

\$435.70

When was the debt incurred?

11/27/19

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Medical bill

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK4.4
7Washington Gas

Last 4 digits of account number

\$40.10

Nonpriority Creditor's Name

P.O. Box 37747

When was the debt incurred?

Philadelphia, PA 19101-5047

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Contingent☐ Debtor 2 only☐ Unliquidated☐ Debtor 1 and Debtor 2 only☒ Disputed☒ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify Claim solely against Systems Support Products, LLC, listed for information only**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

AllianceOne4850 Street Rd., Suite 300Trevese, PA 19053

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

AlliedInterstate, LLCP.O. Box 361445Columbus, OH 43236

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.34 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

AMCBP.O. Box 37005Baltimore, MD 21297-3005

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.23 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

ARSI555 St. Charles Dr., Suite 110Thousand Oaks, CA 91360-3983

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Credit Collection ServicesP.O. Box 55126Boston, MA 02205-5126

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.36 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

King & Nordlinger, LLP3030 Clarendon Blvd.Suite 300Arlington, VA 22201

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Marc Stevens, Esq.McKenzie, Becker & Stevens8 Holley St., P.O. Box 1967Lakeville, CT 06039

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.27 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 Robert Morris Levin

Case number (if known)

20-11046-BFK

Name and Address

Rees, Broome, PC
1900 Gallows Rd., Suite 700
Vienna, VA 22182

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total
claims
from Part 1

6a. Domestic support obligations

6a. \$ 0.00

6b. Taxes and certain other debts you owe the government

6b. \$ 0.00

6c. Claims for death or personal injury while you were intoxicated

6c. \$ 0.00

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. \$ 0.00

6e. Total Priority. Add lines 6a through 6d.

6e. \$ 0.00

Total
claims
from Part 2

6f. Student loans

6f. \$ 0.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ 0.00

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ 0.00

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. \$ 404,754.97

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 404,754.97

Fill in this information to identify your case:

Debtor 1	Robert Morris Levin		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	20-11046-BFK		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?**
☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Villa del Palmar - PV Constructora de Los Ancos del P.O. Box 51469 Los Angeles, CA 90051-5769	Debtor is party to a time-share contract with this entity for a Baja California condominium, at the rate of \$645/yr.

Fill in this information to identify your case:

Debtor 1	Robert Morris Levin		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	20-11046-BFK		

☐ Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1 Levin Associates
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

- ☐ Schedule D, line _____
☒ Schedule E/F, line 4.31
☐ Schedule G _____
Office Depot Business Credit

3.2 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

- ☒ Schedule D, line 2.1
☐ Schedule E/F, line _____
☐ Schedule G _____
M&T Bank

3.3 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

- ☐ Schedule D, line _____
☒ Schedule E/F, line 4.4
☐ Schedule G _____
Bolhouse, Baar & Hofstee, PC

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.4 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.9
☐ Schedule G _____
Capital One Bank (USA), N.A.

3.5 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.8
☐ Schedule G _____
Capital One Bank

3.6 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.11
☐ Schedule G _____
Citibank, N.A.

3.7 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 2.1
☐ Schedule G _____
Commonwealth of Virginia

3.8 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 2.2
☐ Schedule G _____
Internal Revenue Service

3.9 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.34
☐ Schedule G _____
Public Storage

3.10 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.35
☐ Schedule G _____
Public Storage

3.11 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.26
☐ Schedule G _____
Knape & Vogt Manufacturing Co.

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.12 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.27
☐ Schedule G _____
Light Corp.

3.13 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.1
☐ Schedule G _____
Atech Advanced Fabricating Co

3.14 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.2
☐ Schedule G _____
Air Movers, Inc.

3.15 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.6
☐ Schedule G _____
Byrne Electrical Specialists

3.16 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.12
☐ Schedule G _____
Dell Financial Services

3.17 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.15
☐ Schedule G _____
Electri-Cable Assembly, Inc.

3.18 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.14
☐ Schedule G _____
E. Clifton Ingram Jr. CPA

3.19 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.16
☐ Schedule G _____
Envision Automation, LLC

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.20 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.17
☐ Schedule G _____
Estes Express Lines

3.21 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.18
☐ Schedule G _____
Federal Express

3.22 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.3
☐ Schedule G _____
AllianceOne

3.23 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.20
☐ Schedule G _____
Gibraltar GB Products

3.24 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.21
☐ Schedule G _____
Hathaway

3.25 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.22
☐ Schedule G _____
High-Q Lighting, Inc.

3.26 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.24
☐ Schedule G _____
IS Tech Support, Inc.

3.27 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.25
☐ Schedule G _____
Keystone Laminates, Inc.

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.28 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.28
☐ Schedule G _____
Link + Corporation

3.29 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.29
☐ Schedule G _____
M&T Bank

3.30 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.30
☐ Schedule G _____
Micro Plastics, Inc.

3.31 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.32
☐ Schedule G _____
Offix

3.32 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.33
☐ Schedule G _____
Pitt Ohio Express, LLC

3.33 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.37
☐ Schedule G _____
R&L Carriers, Inc.

3.34 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.39
☐ Schedule G _____
Softworqs, Div. of UC Ind.

3.35 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.40
☐ Schedule G _____
South Central Polymers, Inc.

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.36 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.41
☐ Schedule G _____
Techne TSC

3.37 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.43
☐ Schedule G _____
United Parcel Service

3.38 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.44
☐ Schedule G _____
US Tech, LLC

3.39 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.47
☐ Schedule G _____
Washington Gas

3.40 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.7
☐ Schedule G _____
Canada Revenue Agency

3.41 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.10
☐ Schedule G _____
Chantilly Parc, LLC

3.42 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.19
☐ Schedule G _____
Flinn & Beagan

3.43 Systems Support Products, LLC
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☐ Schedule D, line _____
☒ Schedule E/F, line 4.38
☐ Schedule G _____
Rees, Broome, PC

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.44 Terri Levin
9126 Briarwood Farms Ct.
Fairfax, VA 22031-1346

☒ Schedule D, line 2.2
☐ Schedule E/F, line _____
☐ Schedule G _____
U.S. Bank Home Mortgage

Fill in this information to identify your case:

Debtor 1 Robert Morris Levin

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 20-11046-BFK
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

		Debtor 1	Debtor 2 or non-filing spouse
1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.	Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
	Occupation	<u>Salesman</u>	<u>Office manager</u>
	Employer's name	<u>The Carpet Yard</u>	<u>Blackrock Holdings, LLC</u>
	Employer's address	<u>1315 Chain Bridge Rd. McLean, VA 22101</u>	<u>1489 Chain Bridge Rd., Suite 200 McLean, VA 22101</u>
	How long employed there?	<u>8 months</u>	<u>6 1/2 years</u>

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>5,484.85</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>5,484.85</u>

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 0.00	\$ 5,484.85
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 662.61
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 1,087.65
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 108.33
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify:	5h.+ \$ 0.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 1,858.59
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 3,626.26
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 1,911.00	\$ 2,357.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: <u>Commission</u>	8h.+ \$ 1,973.32	+ \$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 3,884.32	\$ 2,357.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,884.32 + \$ 5,983.26	= \$ 9,867.58
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$	9,867.58
Combined monthly income		
13. Do you expect an increase or decrease within the year after you file this form?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes. Explain: Debtor has been furloughed due to the pandemic and does not know when his income (base pay of \$500 bi-weekly, plus commissions) will resume		

Fill in this information to identify your case:

Debtor 1 Robert Morris Levin

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA

Case number 20-11046-BFK
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 3,414.51

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 250.00

4d. Homeowner's association or condominium dues

4d. \$ 57.50

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 2,513.18

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	375.00
6b. Water, sewer, garbage collection	6b. \$	60.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	314.53
6d. Other. Specify: <u>Lawn service</u>	6d. \$	105.00
7. Food and housekeeping supplies		7. \$ 1,000.00
8. Childcare and children's education costs		8. \$ 0.00
9. Clothing, laundry, and dry cleaning		9. \$ 175.00
10. Personal care products and services		10. \$ 150.00
11. Medical and dental expenses		11. \$ 200.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.		12. \$ 570.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books		13. \$ 200.00
14. Charitable contributions and religious donations		14. \$ 0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	155.25
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	195.00
15d. Other insurance. Specify: _____	15d. \$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>Personal property taxes on vehicles</u>		16. \$ 24.43
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	405.66
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify: _____	17c. \$	0.00
17d. Other. Specify: _____	17d. \$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		18. \$ 0.00
19. Other payments you make to support others who do not live with you. Specify: _____		\$ 0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
21. Other: Specify: _____	21. +\$	0.00
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	10,165.06
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	10,165.06
23. Calculate your monthly net income.		
23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I.	23a. \$	9,867.58
23b. Copy your monthly expenses from line 22c above.	23b. -\$	10,165.06
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	-297.48
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.	Explain here: _____	

Debtor 1	Robert Morris Levin		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA			
Case number	20-11046-BFK		
(if known)			

Best Case Bankruptcy

Debtor 1 Robert Morris LevinCase number (if known) 20-11046-BFK

	Debtor 1		Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.
For last calendar year: (January 1 to December 31, 2019)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$27,636.36	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, 2018)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$2,991.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1		Debtor 2
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.
From January 1 of current year until the date you filed for bankruptcy:	Social security benefits	\$5,733.00	
For last calendar year: (January 1 to December 31, 2019)	Social security benefits	\$22,572.00	
For the calendar year before that: (January 1 to December 31, 2018)	Social security benefits	\$5,568.00	
	Interest	\$1.00	

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☒ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

- ☐ No. Go to line 7.
☒ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**
 During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Debtor 1 Robert Morris LevinCase number (if known) 20-11046-BFK

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
U.S. Bank Home Mortgage P.O. Box 790415 Saint Louis, MO 63179-0415	Regular mortgage payments over last 90 days	\$10,243.53	\$663,046.23	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other___

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☒ No
☐ Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
----------------------------	------------------	-------------------	----------------------	--

Part 4: Identify Legal Actions, Repossessions, and Foreclosures9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
☒ Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
M&T Bank v. Robert M. Levin, et al. Case No. CL-2017-0002007	Civil action	Fairfax County Circuit Court 4110 Chain Bridge Rd. Fairfax, VA 22030	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Knappe & Vogt Manufacturing Company v. Robert M. Levin, et al. Case No. 16-06084-CKB	Civil action	State of Michigan 17th Circuit Court of Kent County 180 Ottawa Ave., N.W. Grand Rapids, MI 49503	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded Judgment entered 6/23/17

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
Check all that apply and fill in the details below.

- ☐ No. Go to line 11.
☒ Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
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Debtor 1 Robert Morris LevinCase number (if known) 20-11046-BFK

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
M&T Bank P.O. Box 1302 Buffalo, NY 14240-1302	Social security benefits <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input checked="" type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.	3/18/20 (\$286.65); 2/19/20 (\$286.65); 1/15/20 (\$286.65)	\$859.95
M&T Bank P.O. Box 1302 Buffalo, NY 14240-1302	Social security benefits <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input checked="" type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.	\$282.15 every month in 2019	\$3,385.80

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Dates you contributed	Value
Charity's Name Address (Number, Street, City, State and ZIP Code)			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?
Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Tyler, Bartl & Ramsdell, P.L.C. 300 N. Washington St., Suite 310 Alexandria, VA 22314	\$3,500, plus \$362 in applicable filing fees and costs	7/27/17	\$3,862.00
Access Counseling, Inc.		3/16/2020	\$0.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
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19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☒ No

☐ Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☒ No

☐ Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☐ No

☒ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Systems Support Products, LLC 9126 Briarwood Farms Ct. Fairfax, VA 22031-1346	Debtor's residence	Miscellaneous office furniture and left over business inventory	\$500.00
Debtor's wife 9126 Briarwood Farms Ct. Fairfax, VA 22031-1346	Debtor's residence	Debtor has mutual possession of, and control over, miscellaneous personal belongings of his wife, with whom he resides	Unknown

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ☒ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☒ **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☒ **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☐ No. None of the above applies. Go to Part 12.
☒ Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
Systems Support Products, LLC dba Best Ergonomics 14916 Bogle Dr. Chantilly, VA 20151-1723	Office furniture manufacturing E. Clifton Ingram, CPA	Dates business existed EIN: 54-2061665 From-To August 2001-August 2016

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
☐ Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
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Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Robert Morris Levin
Robert Morris Levin
Signature of Debtor 1

Signature of Debtor 2

Date May 4, 2020

Date

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

☐ Check if this is an amended filing

12/15

☐ creditors have claims secured by your property, or

☐ you have leased personal property and the lease has not expired.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral		What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	M&T Bank	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: Make regular payments without formal reaffirmation agreement	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt:	9126 Briarwood Farms Ct. Fairfax, VA 22031-1346 Fairfax County		
Creditor's name:	U.S. Bank Home Mortgage	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: Make regular payments without formal reaffirmation agreement	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt:	9126 Briarwood Farms Ct. Fairfax, VA 22031-1346 Fairfax County		

Official Form 108

Debtor 1 Robert Morris Levin

Case number (if known) 20-11046-BFK

Describe your unexpired personal property leases

Will the lease be assumed?

Lessor's name:

☐ No

Description of leased

Property:

☐ Yes

Lessor's name:

☐ No

Description of leased

Property:

☐ Yes

Lessor's name:

☐ No

Description of leased

Property:

☐ Yes

Lessor's name:

☐ No

Description of leased

Property:

☐ Yes

Lessor's name:

☐ No

Description of leased

Property:

☐ Yes

Lessor's name:

☐ No

Description of leased

Property:

☐ Yes

Lessor's name:

☐ No

Description of leased

Property:

☐ Yes

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Robert Morris Levin

Robert Morris Levin

Signature of Debtor 1

X _____

Signature of Debtor 2

Date May 4, 2020

Date _____